	PATENT A	APPLICATIO Effect	N FEE DE	RD 	09/831992								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			:				R/	TE	FEE		RATE	EEE.	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	355.00	OR	Basic Fee	ARS	
TOTAL CHARGEABLE CLAIMS			// minus 20=		•		X	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		•		X	X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+1	35=		OR	+270=		
* If the difference in column 1 is less than zero, enter *0* in column 2						то	TOTAL		OR	TOTAL	860		
12 (% Of CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								ALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A	, 1.je	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	• 11	Minus	2	٥	-/	XS	9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	···	3	<u> </u>	X	10=		OR	X80=		
<u></u>	PINST PHESE	NIATION OF MI	ULTIPLE DEP	ENDEN	CLAIM		+1	35=		OR	+270=		
8-1-05 (Column 1) (Column 2) (Column 3)								OYAL T. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	10		IEST BER OUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	:	Minus	. 2	\mathcal{Q}	5	X	9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	CLANA	<u> </u>	X	IO=		OR	X80=		
<u> </u>	FIRST PRESE	NIATION OF ME	JUIPLE DEF	ENDEN	COAM	CLAIM		35=		OR	+270=		
								OTAL		OR	YOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	3.34	NUM		PRESENT EXTRA	R/	TE	TIONAL EE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		e	X\$	9=		OR	X\$18=		
	Independent	•	Minus	•••		<u> </u>	X4	0=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 +1:	35=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. **If the "Highest Number Previously Paig For IN THIS SPACE is less than 20, enter "20." **ADDIT FEE													
***	li the "Highest Nu The "Highest Num	mber Previously Pather Previously Pa	aid For IN THI id For (Total o	5 SPACE r Independ	is less tha (ent) is the	an 3, enter "3." Highest numb			regulate box	ı in co	lumn 1.		

FORM PTO-875 (Rev. 8/00)

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Application or Docket Number